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Definitions: EMR, Portals, PHR (Personal Health Record)

EMR is a computerized record of a patient's clinical, demographic, and administrative data. Also known as a computer-based patient record

Portals are online applications that allow patients to interact and communicate with healthcare providers and institutions

Personal Health Record (PHR) is a health record that is initiated, maintained, and owned by the patient

All iSALUS healthcare EMR clients get the portal and PHR for distribution to their patients at no extra cost.

What to Look for Planning for the Future?

- iSALUS healthcare alone offers a unified solution that has a certified EMR, a fully functional Practice Management AND a Practice Portal that allows the practice to distribute Personal Health Records (PHR) to their patients
- iSALUS healthcare's EMR alone is only \$275/ month for the MHCC program; this includes all e-Rx fees.
- iSALUS healthcare also provides all EMR clients with the ability to provide Personal Health Records (PHR) to their patients to assist in the management of that patient relationship. No other vendor offers a web based (SaaS) service within one common service solution.
- iSALUS healthcare offers a pleasing-to-the-eye, attractive, uncluttered, highly customizable, and flexible tool. The future is now.

A good EMR should have

Clinical Workflow Tasking
Patient Scheduling
Hospital Rounds
To Do Lists

The screenshot displays an EMR interface. On the left is a sidebar with navigation options: My Tasks, Patients, Reports, EMR, Scheduler, Bill & Collect, Deposit Posting, eDocuments, and Folder List. The main content area is titled 'EMR' and contains a 'Patient Charts' section with an 'Office Schedule' for Thursday, April 23, 2009. The schedule lists three patients: McCormick, Robert (68yr) at 2:00PM - 3:00PM for a follow-up on diabetes and hypertension; Davis, Mark (68yr) at 3:00PM - 3:30PM for dizziness; and Jones, Mike H. (28yr) at 3:30PM - 4:30PM for a headache. Below the schedule is a 'Hospital Rounds' section, currently set to 'Community North', listing staff members: Effron, Zac (M) 52yr; Smith, Donna L. (F) 67yr; King, Monica L. (F) 54yr; Wentz, Pete (M) 29yr; and Stolz, Kim (F) 25yr.

My Tasks

- Communication (0)
- Orders (173)
- Superbill (4)
- Soap Notes (14)
- eDocuments (1)
- Reminder (3)

April 2009

Su	Mo	Tu	We	Th	Fr	Sa
29	30	31	1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	1	2

Office Schedule

Hospital Rounds

EMR

Patient Charts

Office Schedule

Thursday Apr 23, 2009
Checked-In: 0

1 0

McCormick, Robert (68yr)
2:00PM - 3:00PM
Follow-up on diabetes, hyperten
Scheduled
Exam Room #2

Davis, Mark (68yr)
3:00PM - 3:30PM
Dizziness
Scheduled

Jones, Mike H. (28yr)
3:30PM - 4:30PM
Headache
Scheduled
Exam Room #1, with Dr. Mayna

Hospital Rounds

Arranged By: Location

Community North

Effron, Zac (M) 52yr
Smith, Donna L. (F) 67yr

St. Vincent's 86th Street

King, Monica L. (F) 54yr
Wentz, Pete (M) 29yr
Stolz, Kim (F) 25yr

A good EMR should have

Summary Lists
Problem
Medications
Allergies

Problem List				
#	Description	Code	Onset	
1	Diabetes Mellitus without mention of complication	250.00	04/01/2007	▲
2	Benign Hypertension	401.1	04/01/2007	
3	Hyperlipidemia NEC/NOS	272.4	04/01/2007	

Medications				
Drug & Dosage	Pharmacy	Refills	Date	Status
Losartan 50 mg Tab 1 QD		One	04/23/2009	Current
Aspirin 81 mg Cap			04/08/2009	Current
Vardenafil 20 mg Tab 1		Three	06/04/2008	Current
Metformin 500 mg Tab		Three	04/01/2007	Current
Hydrochlorothiazide 25 mg Tab 1 am		PRN	04/01/2007	Current

Allergies	
<input checked="" type="checkbox"/> Reviewed	
	<ul style="list-style-type: none">• Medications - Ace Inhibitors - Cough• Medications - Penicillins - Rash

Patient History	
	<p><u>Social History</u> Exercise: Aerobic, 4 times per week, 30 minutes per day Stress: Related to wifes memory problems Alcohol Use: Current, 1 drink per day, Red Wine Former Tobacco Use: cigarettes, stopped in 2008</p>

Immunizations	
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A good EMR should have

Order Entry (CPOE)
Integrated Workflow
Labs & Result Routing
Diagnostic Tests
Prescriptions

MRI					Laboratory Studies	
Location	Right With Contrast	Right Without Contrast	Left With Contrast	Left Without Contrast	Drug Levels	Liver
Knee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Phenytoin (Dilantin), Serum	<input type="checkbox"/> Amylase, Urine
Shoulder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Theophylline, Serum	<input type="checkbox"/> Hepatitis Panel
Hip	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Digoxin (Lanoxin), Serum	<input type="checkbox"/> Lipase, Serum
Ankle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Lithium (Eskalith), Serum	Organ/Disease Panels
Foot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Valproic Acid (Depakote)	<input type="checkbox"/> Basic Metabolic Panel (8)
Hand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Endocrine	<input type="checkbox"/> Comp. Metabolic Panel
Wrist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> TSH	<input type="checkbox"/> Electrolyte Panel
Thumb	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Thyroxine (T4)	<input type="checkbox"/> Hepatic Function Panel
Elbow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Triiodothyronine (T3)	<input type="checkbox"/> Lipid Panel
					<input type="checkbox"/> Creatine Kinase, MB/Total	<input type="checkbox"/> Fasting Lipid Profile
					<input type="checkbox"/> FSH, Serum	Microbiology
Pelvis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> PSA, Serum	<input type="checkbox"/> Albumin, Serum
Cervical Spine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Vitamin B12	<input type="checkbox"/> Genital Culture, Routine
Thoracic Spine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Folate (Folic Acid), Serum	<input type="checkbox"/> Group B Strep Cult/DNA
Lumbar Spine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Ferritin, Serum	<input type="checkbox"/> Group A Streptococcus
					<input type="checkbox"/> Prolactin	<input type="checkbox"/> Influenza A
					<input type="checkbox"/> Testosterone, Serum	<input type="checkbox"/> Influenza B
					Hematology	<input type="checkbox"/> Urine Pregnancy Test
					<input type="checkbox"/> CBC w Diff w Plt	<input type="checkbox"/> Creatinine
					<input type="checkbox"/> CBC w Diff w/o Plt	<input type="checkbox"/> Urinary Microalbumin
					<input type="checkbox"/> CBC w/o Diff w/o Plt	Miscellaneous

Arranged By: Date						
Date: Last Week						
Labs	TSH	04/23/2009 00:00:00	Hall, Michael	Open	Nurse	
Labs	Comp. Metabolic Panel	04/23/2009 00:00:00	Hall, Michael	Open	Nurse	
Other	Diabetes Patient Education	04/23/2009 00:00:00	Hall, Michael	Open	Greenfiel...	
Other	Hypertension Patient Educat...	04/23/2009 00:00:00	Hall, Michael	Open	Greenfiel...	
Other	Return Visit - 3 Months	04/23/2009 00:00:00	Hall, Michael	Open	Nurse	
Other	Referral to Christopher Martin	04/23/2009 00:00:00	Hall, Michael	Open	Greenfiel...	
Other	Referral to Mark Day	04/23/2009 00:00:00	Hall, Michael	Open	Greenfiel...	
Other	Referral to Kimberly Poland	04/23/2009 00:00:00	Hall, Michael	Open	Greenfiel...	
Labs	Fasting Lipid Profile	04/23/2009 00:00:00	Hall, Michael	Open	Nurse	
Labs	Creatinine	04/23/2009 00:00:00	Hall, Michael	Open	Nurse	
Labs	Hemoglobin A1c	04/23/2009 00:00:00	Hall, Michael	Open	Nurse	
Date: Older						
Labs	Basic Metabolic Panel (8)	04/01/2007 00:00:00	Administrator, L...	Open	Administr...	
Labs	Hemoglobin A1c	04/01/2007 00:00:00	Administrator, L...	Open	Administr...	
Labs	Lipid Panel	04/01/2007 00:00:00	Administrator, L...	Open	Nurse	
Labs	FBS	04/01/2007 00:00:00	Administrator, L...	Open	Nurse	

A good EMR should have


e-Prescribing
Interaction checking
Formulary Management
Refills

Drug Search Drug Edit

My Favorite My Therapeutic Classes Other Favorites

Drug and Dosage for Office Favorites

	Fluoxetine 10 mg Cap [Disp: 90.00 Sig: 1 QD Start one daily for 2 weeks, inc to 2 daily]
	Glucophage 1,000 mg Tab [Disp: 60.00 Tablet Sig: 1 BID]
	Golytely 236 g-22.74 g-6.74 g-5.86 g Oral Solution [Sig: 4 ltr Drink small amounts over 4-5 hrs]
	Hydrochlorothiazide 25 mg Tab [Disp: 90.00 Tablet Sig: 1 am]
	Hydroxyzine 50 mg Tab [Disp: 30.00 Tablet Sig: 1 QHS pm itching]
	Ibuprofen 600 mg Tab [Disp: 90.00 Tablet Sig: 1 TID with food]
	Imdur 30 mg 24 hr Tab [Disp: 30.00 Sig: 1 QD]
	Imitrex 100 mg Tab [Disp: 9.00 Tablet Sig: 1 Take 1 tablet as soon as possible after migraine ...]



Hall, Michael
Prescribing For
Martin M.D., James M.

Patient Name: McCormick, Robert
Patient Address: 212 W. 10th Street Indianapolis, IN 46202

Drug: Hydrochlorothiazide 25 mg Tab
Dispense: 90.00 Tablet
Sig: 1 TAB ORAL am
Refills:
Alert:
Comment:
Dispense as Written: Yes
Pharmacy:

Void Date:
Patient Reported: No
More

Send

Print

Save

A good EMR should have

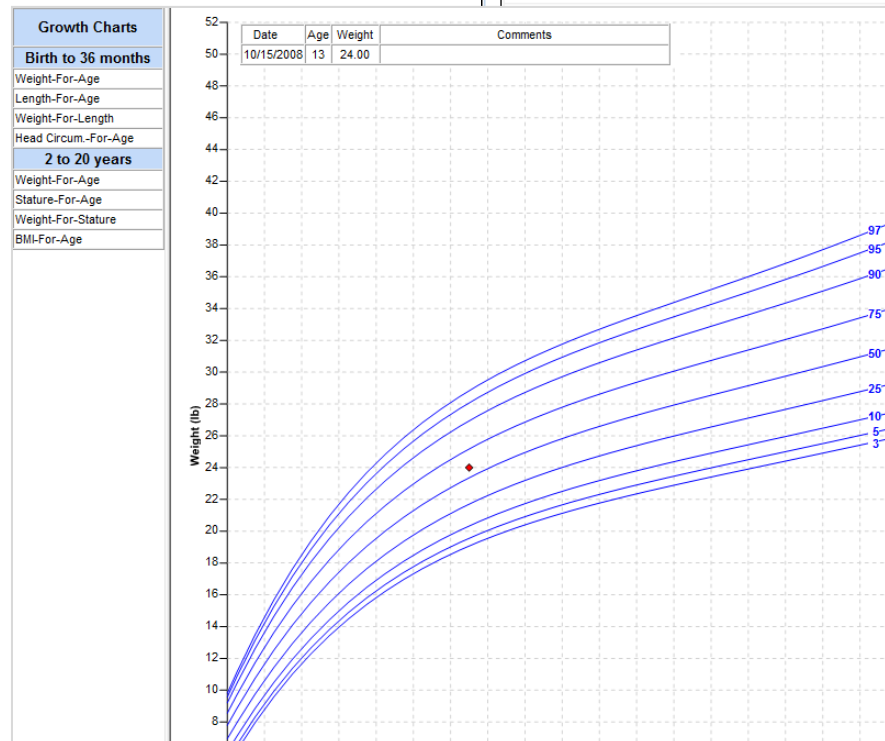
Results Management
Abnormal results warning
Trending/graphing

Order Lab Results -- Webpage Dialog

Lab Corp.
1350 East County Line Road
Indianapolis, IN 46227
Phone: (317) 884-0691

OfficeEMR Patient Id 9329	Patient Name Jones, Mike H. Sr	Sex M	Age 28	Date Of Birth 06/01/1980
Requisition Number D9732	Account Number 9329	Control Number 20080404104300	Date and Time Collected 04/04/2008 10:43am	Date Reported 04/04/2008
Ordering Physician Hong M.D., Richard				

Name	Value	Flag	Range	UDM	Status	Date	Lab
Lipid Panel							
Cholesterol, Total	175	N		mg/dL	F	04/04/2008	
HDL Cholesterol	30	N		mg/dL	F	04/04/2008	
LDL Cholesterol Calc	100	N		mg/dL	F	04/04/2008	
				mg/dL	F	04/04/2008	
				mg/dL	F	04/04/2008	



A good EMR should have

Decision Support
Clinical Practice Guidelines
Disease Management
Preventive Care

Patient Management				
Description	Check	Today's Results	Previous Results	Previous Date
 Vitals				
Height			5 feet 6.00 inches	04/23/2009 7:15am
Weight			219 lbs	04/23/2009 7:15am
Sitting B/P			138mm/88Hg	04/23/2009 7:15am
Sitting Pulse Rate			72	04/23/2009 7:15am
Respiration Rate			14 Breaths/Minute	04/23/2009 7:15am
 Disease Managment: Diabetes				
 Disease Managment: Hypertension				
Soap Notes				
Blood Pressure				
Systolic Blood Pressure	1-1 Years		138	04/23/2009 7:15am
Diastolic Blood Pressure	1-1 Years		88	04/23/2009 7:15am
Tobacco Assessment/Counseling				
Immunizations				
Influenza : Date Given	1-1 Years		11/15/2006	04/21/2009
Pneumoccal : Date Given			05/03/2003	04/21/2009
Lipid Profile				
Cholesterol, Total	1-1 Years			
HDL Cholesterol	1-1 Years			
LDL Cholesterol	1-1 Years			
Triglycerides	1-1 Years			
Screening Tests				
Colonoscopy	10-10 Years			

A good EMR should have

Charge Capture/Billing
Medical necessity
E&M coding
Insurance Eligibility

Superbill Internal Superbill Claim # Claim Status

Service Location Rockford Nephrology Associates

Procedures

- 1 - Office Services
- 2 - Consultation
- 3 - Nuclear Medicine Studies
- 4 - Cardiovascular Procedures

ECG Interpretation & Report 93000 ✓
ETT Treadmill 93015
Holter Monitor 24 hr/48hr 93224
Echo 93307
Doppler Echo 93320
Color Flow 93325
Echo Limited 93308
Doppler Echo Limited 93321
Color Flow Limited 93325
PM Analy Dual w/o Rep 93731
PM Analy Dual w/Rep 93732
PM Analy Single w/o Rep 93734
PM Analy Single w/Rep 93735

Diagnosis

Problem List

Diabetes Mellitus without mention of complication 250.00 ✓
Benign Hypertension 401.1 ✓
Hyperlipidemia NEC/NOS 272.4 ✓

Aneurysm (Dissecting & Rupture)
Cardiac Arrhythmia
Cardiomyopathy
Chronic Rheumatic Heart Disease
Conduction Disorders
Congenital Heart Disease
Coronary Artery Disease
General
Heart Failure
Hypertension
Hypovolemic Septic Shock
Lipid Abnormalities

Charge Summary

☐ Edit Charges

DOS	Code	Units	Charge	Amount	401.1	272.4	250.00
04/23/2009	93000	1	\$50.00	\$50.00	✓		✓
04/23/2009	99213	1	\$90.00	\$90.00	✓	✓	✓
				Total =	\$140.00		

E/M Coding

DOS 04/30/2009

DOS	Hx	Exam	MDM
99215			
99214			
99213			
99212			
99211			

Refresh

A good EMR should have

Clinical Document Management
Document scanning
Import/export



Colonoscopy Report.pdf - Adobe Reader

File Edit View Document Tools Window Help

91.3% 1 / 1 Find

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925 48th Street
Brooklyn, NY 11219
Ph : (718) 851-6767
Fax : (718) 851-5807

SAMPLE COLONOSCOPY REPORT

PATIENT NAME	PATIENT ID	DOB	AGE	SEX	EXAM DATE	ATTENDING PHY	REFERRAL
JOHN D. JR*	111-22-3333	11-11-1944	57	M	11-29-2001	John Williams*, M.D.	John Smith, M.D.*

INDICATION : Patient has h/o rectal bleeding
HISTORY : Patient has h/o colon cancer with resection
PHYSICAL EXAM : HEENT: Normal Lymph Nodes: Normal Lungs: Normal Heart: Normal
ABDOMEN: Normal MENTAL STATUS: Normal
VITAL SIGNS : BP: 120/80 RESPIRATION: 100 PULSE: 80 TEMPERATURE: 80 WEIGHT: 150

history and performing the physical examination, the procedure, including, perforation, infection, adverse medication reaction and alternatives are discussed to understand the benefits and risks of this procedure. Informed consent is obtained and opportunity for questions.

Pressure and oxygen saturation monitored

Type 140 L Colonoscope

ent in the left lateral decubitus position, the colonoscope was gently intubated to the ileum which was identified by transillumination of the cecum, appendiceal orifice, cecal strap. Color, texture, mucosa and peristalsis were noted. The patient tolerated the procedure well and there were no complications. Patient was transferred to the recovery room.

Orthoids
cm size

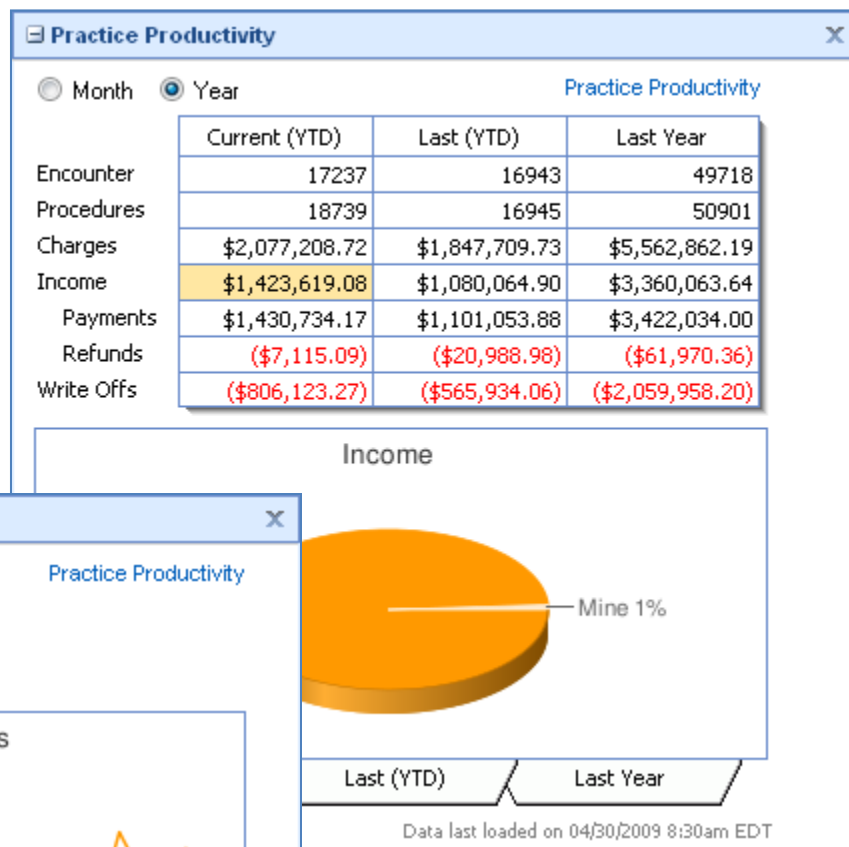
a. Anastomosis

b. Polyp of Sigmoid colon

c. Post polypectomy

A good EMR should have

How's my business doing
Summarized
Snapshots
Trends
Financial Alerts



The Current Market

- Highly fragmented market
- Only a few are Web-based; most are old Client Server even when offering ASP they are slower and less flexible
- Industry Direction
 - ✓ Consolidation
 - ✓ Technology challenged vendors will be forced out
 - ✓ Functionality will become standardized
 - ✓ Good design will become more important
 - ✓ Prices will fall
 - ✓ Comprehensive solutions (EMR, PM, PHR, etc) will be expected

Deciding on a Solution

- Focus on CCHIT certified vendors for now:
 - Meeting existing requirements for security and interoperability
 - Ensures the application are evolving and standardized
 - Only vendors who have proven track record of adapting to market conditions
- Soon all certified vendors will have the same capability:
 - Focus on “ease of use”
 - Focus on an intuitive tool; you’ll be using it every day from the office and home
- Internet capability will be a requirement soon:
 - If you buy a client server solution make sure you understand the limitations and hidden costs of their ASP delivered options. They are not the same as web based systems like iSALUS healthcare.
 - If you buy another Web-based solution pay attention to contract terms and service level agreements
- Portals & PHR will be a requirement of doing business
 - The lack of an Internet strategy = no business model for the future